DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 214406	RECEIPT DATE: 12 / 28 / 98
IA NUMBER: PCT/ US97 / 11248	IA FILING DATE: 06 / 28 / 97
FAMILY NAME: MALCOLM	DELAY WAIVED (Y/N): N
GIVEN NAME: JOHN J	DEMAND RECEIVED (Y/N): N
PRIORITY CLAIMED (Y/N): Y	PRIORITY DATE: 06 / 28 / 96
NO BASIC FEE (Y/N): N	US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER:	COUNTRY: USX
CORRESPONDENCE NAME/ADDRESS: CUSTOMER	NUMBER: 000000 TELEPHONE 4087327737

FAX 4087327876

MAME: CAROL D TITUS

STREET: 505 W OLIVE AVENUE

SUITE 330

CITY: SUNNYVALE

STATE/COUNTRY: CA ZIP: 94086

EMAIL:

APPLICATION TITLES:

COMBINED EVENT CALENDAR AND PICTURE FRAME

TAB TO LAST POSITION, PUSH SEND

